

September 27, 2005

Dear: House Senior Health, Security and Retirement Committee Members:

SERVICE EMPLOYEES INTERNATIONAL UNION AFL-CIO, CLC

> MICHIGAN STATE COUNCIL

PHILLIP THOMPSON
President

MEL GRIESHABER Vice President

WILLIE HAMPTON Treasurer

JEANETTE WILLIAMS Recording Secretary The Service Employees International Union (SEIU) Local 79 and SEIU Michigan State Council oppose House Bill 4789, which allows nursing home facilities to use feeding assistants. SEIU believes that the use of feeding assistants in nursing homes is an untested policy that is unlikely to improve the quality of care and may very well put residents and employees at risk. Instead, the state should be trying to increase the certified nurse aide (CNA) staffing levels before placing less-trained workers in Michigan's nursing homes.

SEIU's primary objections can be summarized as follows:

- 1. There is no research to suggest that the use of feeding assistants will improve the quality of care for residents. In Wisconsin, after seven years of using feeding assistants or single task workers, there has been no marked improvement in the quality of care of nursing homes, in fact, preliminary indicators suggest that the practice is associated with worse, not better care.
- 2. Researchers believe that less than 75 hours of training is not sufficient to prepare workers to properly assist ill and fragile nursing home residents with their meals. Nursing homes are caring for residents with more complex illnesses and conditions; feeding them or identifying their problems can be VERY intricate and failure to recognize and deal appropriately with these disorders can lead to dehydration, malnutrition, aspiration pneumonia, and asphyxiation. When dealing with such a vulnerable population, the mere passage of seconds can mean life or death for nursing home residents.
- 3. HB 4789 creates incentives for facilities to replace fully trained certified nurse aides with less-trained workers. House Bill 4789 does not include additional funding for nursing homes to hire additional staff. Instead, it gives facilities the freedom to change the composition of their workforce by shifting some of the work currently done by CNAs, to part-time employees who earn less. In other words, supplanting the existing staff with lower paid and less trained workers, instead of supplementing it. Many facilities will remain understaffed and the staff present will have less training and fewer skills.

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- 4. Feeding assistants are likely to receive even less pay than CNAs and we anticipate an even higher turnover rate and less commitment to their job among them.
- 5. HB 4789 will disrupt continuity of care and reduce quality by creating an "assembly line" atmosphere for residents. Dividing up the responsibilities involved in caring for nursing home residents by doling different tasks out to different workers will create an assembly line atmosphere in nursing homes. Residents will be handed from one person to another throughout the day for their care, disrupting the personal connection with their caregiver. Nursing home residents have a right to "dignified existence" under law and this is promoted in an environment wherein residents know and trust the people who provide them with intimate care and not treated like an auto part.
- 6. It is inevitable that feeding assistants are likely to be called upon to perform other care-giving tasks in addition to feeding that they are not trained to carry out. In chronically understaffed facilities, we anticipate feeding assistants will be forced to perform other functions such as transferring and toileting residents for which they have no training. These activities can endanger both the residents and feeding assistants.
- 7. Adopting this legislation is putting the proverbial cart before the horse. The Department of Community Health is currently performing a pilot project on this very same issue. This legislation mandates implementation unless this pilot program is shown to have a "detrimental impact on patient care and well-being." What does "detrimental impact" mean? Does that mean if it moderately or somewhat reduces the quality of care this bill should be automatically implemented? Instead, this pilot program should be carefully analyzed after its completion to determine whether or not it did improve the quality of care in the participating nursing homes. Taking into consideration not only the safety and incident records but also resident satisfaction and employee turnover rates.

SEIU Local 79 and the Michigan State Council is committed to improving the quality of care in Michigan's nursing homes. We believe that the quality of care in our nursing homes will improve when we increase the staffing levels and the staff have better training, pay, opportunities for advancement and appreciation in the facilities. The creation of a low paid and poorly trained feeding assistant position is two steps backwards from this goal. While we truly wish to work with the state to reduce understaffing and the incidences of malnutrition in our nursing homes, we do not believe that HB 4789 is the right solution and that it may end up doing more harm than good.



Respectfully Submitted,

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